7/14/02

3.

# UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

DEC 1 3 2007 and 13

Plaintiff

MICHAEL W. DOSSINS IN FORMA PAUPERIS APPLICATION

FINANCIAL AFFIDAVIT DEC 1 3 2007

SALVAD SCOTT KI	v. OFCOCK, Illinois 5 Dart or Godinez urtovich And Amo cfendant(s)	la	07cv7012 ludge HIBBLER Mag. Judge NOI	R ∟AN	
and provide I,	is included, please place an ation than the space that is put the additional information.  If Brown in the above prepayment of fees, or I am unable to pay the control perition/motion/appeal. acstions under penalty of put the control pena	rovided, attach one Please PRINT:, declar re-entitled case. The in support of my means of these procees In support of this perjury:  Yes Name of prison	or more pages that are that I am the IP is affidavit constitution for appointmentings, and that I are petition/application or iail: Cook (	refer to each such figure to each such the petition in the such that the first on the first one first on the first on the first on the first one first on the first one first	tioner Imovant ion I to proceed or I foth. I also relief sought in al, I answer the
2. Are y	you currently employed? thly salary or wages:e and address of employer:	□Yes		vionthly amour	ıt:
8.	If the answer is "No": Date of last employmer Monthly salary or wag Name and address of la	es:	Un Newer	DOFK.	
b.	Are you married? Spouse's monthly salar Name and address of em	□Yes y or wages: ployer: ———	<u> </u>		
OI ally	from your income stated a rone else living at the sar s? Mark an X in either "Y	ne address receiv	ed more than \$20	O from any of	4ha C-11
a, Amour	Salary or wages	Received by_	Your mother	□Yes 60A Dr	□No

	b.	□Yes 	<b>E</b> No
	c. ☐ Rent payments, ☐ interest or ☐ dividends Amount Received by	□Yes	<b>14M</b> 0
ī	d. □ Pensions, □ social security, □ annuities, □ life insurance compensation, □ unemployment, □ welfare, □ alimony or man	intenance or ☐ ☐Yes	, D workers child suppos DNo
	Amount Received by		
	e.	□Yes	□No
	f.	∐Yes 	CBN <sub>0</sub>
4.	Do you or anyone else living at the same address have more than \$ savings accounts?		
5.	Do you or anyone else living at the same address own any stocks, financial instruments?  Property: Current Value: In whose name held: Relationship to you:	$\Box$ Yes	ŒΝο
6.	Do you or anyone else living at the same address own any real electrondominiums, cooperatives, two-flats, three-flats, etc.)?  Address of property:  Type of property:  In whose name held:  Amount of monthly mortgage or loan payments:  Name of person making payments:	Yes	apartments,
7.	Do you or anyone else living at the same address own any automobil homes or other items of personal property with a current market value  Property:	of more than \$ □Yes	1000? ☑াশ্
	Current value:		
	Property:  Current value: Relationship to you:		
8.	List the persons who are dependent on you for support, state your relatified indicate how much you contribute monthly to their support. If none, che	onship to each	person and

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date:	Weint Brown
	Signature of Applicant
	Downth Brown
	(Print Name)

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account-prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

### CERTIFICATE

(Incarcerated applicants only) (To be completed by the institution of incarceration)

I certify that the applicant named herein, Dewith Brown, I.D.#2007-0033106, has the sum
of \$ 40,26 on account to his/her credit at (name of institution) Look lounty Dept. 7 Corrections
I further certify that the applicant has the following securities to his/her credit:
certify that during the past six months the applicant's average monthly deposit was \$246
(Add all deposits from all sources and then divide by number of months).
10/ Comb



# Managed Services Managed Better.

## \*\*TRANSACTION REPORT\*\* Print Date: 10/25/2007

BROWN, DEWITT Inmate Name:

Balance:

\$40.26

Inmate Number: 20070023106 11/17/1968 Inmate DOB:

Stamp	Transaction	Amount	Balance
10/18/2007	CREDIT	40.00	40.26
10/04/2007	ORDER DEBIT	-24.86	0.26
09/21/2007	CREDIT	25.00	25.12
08/31/2007	ORDER DEBIT	-5.39	0.12
08/24/2007	ORDER DEBIT	-23.61	5.51
08/16/2007	ORDER DEBIT	-31.10	29.12
08/06/2007	RETURN CREDIT	29.80	60.22
08/06/2007	CREDIT	30.00	30.42
07/26/2007	ORDER DEBIT	-29.80	0.42
07/11/2007	CREDIT	30.00	30.22
04/05/2007	ORDER DEBIT	-1.78	0.22
04/02/2007	CREDIT	2.00	2.00

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